ISSUE SLIP STAPLE AREA (for additional cross references)

	INITIALS	ID NO.	DATE
POSITION	iMITIME		
FEE DETERMINATION		47	4/1,2/3/1
O.I.P.E. CLASSIFIER		C	11/28/21
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RESPONSE FORMALITY REVIEW		670	11100

INDEX OF CLAIMS

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If more than 150 claims or 10 actions staple additional sheet here